

Community Planning & Economic Development Services

Building Safety Division

300 Park Avenue, Suite 103E, Falls Church, VA 22046
Phone: 703-248-5080 (TTY 711) Fax: 703-248-5214 permits@fallschurchva.gov www.fallschurchva.gov

FIRE ALARM & SPRINKLER PERMIT APPLICATION

								PERMIT No.	
ADDRESS OF BUILDING	•								
Street Address			Unit# Falls			Church,	VA	Zip Code	
APPLICANT: ■ CONTRACTOR			OWNER	BUIL	LDIN	IG OWNE	R INFO	DRMATION	
Name		Phone H O C		Name				Phone H O C	
Address				Address					
City	State	e Zip Code		City			State	Zip Code	
VA State Contractor's License Number	Class	1		TENANT/LESSEE INFORMATION ■ NONE Name Phone □ H □ O □ C					
Falls Church Customer Number (if known):			Name					Phone LH LO LC	
Master Electrician's Name (DPOR Qualified Indiv.		Expiration	on Date	Address					
License Number 2710-	Contrac	t Price		City State			Zip Code		
	¥		TYPE O	F Work					
☐ Fire Alarm System ☐			☐ Water Sprinkler System ☐			☐ Chemical Suppression or Hood System			
Low Voltage (< 50V) High Voltage (50V+)			Heads			Heads			
Panels			Fire Pu	ımps	Licensing Requirements				
Devices Horns Flow Switches			Stand Pipe		Please note the State Contractor License classification a permit.			cense classifications required for	
			Standp	ines	Fire Alarm:				
StrobesTamper Switches Pull Stations Heat Detectors			Floors Each			 ELE classification and designated master electrician FAS classification. Designated master electrician if the fire alarm is 50V or more. 			
Door Locks Smoke Detectors						Sprinkler System: The SPR classification, or a PLB classification			
						for limited-area sprinklers (20 or fewer heads in the entire system).			
Total # of Devices:			SIGNATURE			Hood Suppression: The FSP classification.			
Check Policy - The City of Falls Church accepts checks as a form of payment. However, should your check be returned to us for any reason, it is our policy to electronically debit your account for the amount of the check plus a processing fee of \$50.00. I hereby certify the proposed work is authorized by the property owner and I have been authorized by all involved parties to make this application. We agree to conform to all applicable laws, codes, and ordinances of the City of Falls Church.									
Signature of Applicant			•	Addre	Address				
Signature of Applicant Date									
Print Name Phone Number City State Zip Code Submission: E-mail this application, any other required documents, and plans to permits@fallschurchva.gov. Please make all submissions in PDF format. Do not submit photos either in the e-mail or as attachments. The City of Falls Church is committed to the letter and spirit of the Americans with Disabilities Act. This document will be made available in alternate format upon request. Call 703 248-5080 (TTY 711).									
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				Base Permit Fee \$					
				routed to Building Official Third-Party Fee \$					
Third Part Reviews Required? Yes No Date Received: Fee: \$_							% Tech Fo	ee \$ ee \$	
Building Official			Date			2%	6 State Lev		
Approved per VUSBC Only					<u></u>	 fee with 2.95% cr	Total Fo edit-card t		
					U	win 2.75/0 CM	can cara j	ου, φ	